PTO/SB/29 (1/98)

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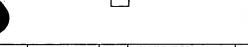
U.S	UTILITY /
	TENT APPLICÁTION
TO	TRANSMITTAL.

M-9152-1D US Attorney Docket No. First Named Inventor or Michael R. Krames et al. Application Identifier III-Nitride Light-Emitting Device With Increased Light Title **Generating Capability** 

1.53(b))	Express	6 Mail Label No.   EL 710 214 375 US			
APPLICATION EL	EMENTS	ADDRESS TO: Commissioner for Patents			
See MPEP chapter 600 concerning utility patent app		Box Patent Application Washington, D.C. 20231			
1. Fee Transmittal Form - see p		rm. 6. Microfiche Computer Program Appendix			
(Submit an original, and a duplicate for fee	processing)	consisting of pages of microfiche containing			
2. Application:		frames on each page in accompanying envelope.			
Specification: (preferred arran		7. Traditional and of Financia Sequence Sections			
Descriptive title of the Inve Cross References to Relate		(if applicable, all necessary)			
Reference to Microfiche A		a. ☐ Computer Readable Copy b. ☐ Paper Copy (identical to computer copy)			
Background of the Invention		c. Statement verifying identity of above copies			
Brief Summary of the Inve		o. Statement verifying identity of above copies			
Brief Description of the Dr Detailed Description (all to	awings, and	ACCOMPANYING APPLICATION PARTS			
Appendix(ces) , , &		8. Assignment Papers (cover sheet & documents) 4 pages			
☐ Claim(s) 3 pages		9.   37 CFR §3.73(b) Statement   Power of Attorney			
Abstract of the Disclosur	e <u>1</u> page	(combined when there is an with Patent Declaration			
3. 🔁 Drawing(s) (35 USC 113)	[Total Sheets 23]				
4. Dath or Declaration unsigned	[Total Pages]				
Newly executed (original	or copy)	11. 🕅 Information Disclosure 💢 41 Copies of IDS			
<b>b</b> . Copy from prior application		.63(d)) Statement (IDS) & PTO-1449 Citations/References			
(for continuation/divisional with Box 17 co	mpleted)				
	(s) named in the prior an	application 12. Preliminary Amendment pages			
see 37 CFR 1.63(d)(2) and 1.33(b).		13. Return Receipt Postcard (MPEP 503)			
5 🔀 Incorporation By Reference					
The entire disclosure of the p		The Simulation of the Control of the			
which a copy of the oath or d					
under Box 4b, is considered					
disclosure of the accompany		status still proper and desired			
hereby incorporated by refere	ence therein.	_ Is no longer claimed.			
		15. Certified Copy of Priority Document(s)			
in the state of th		(if foreign priority is claimed)			
The state of the s		16.  Other:			
The state of the s		Copy of Petition for Extension of Time filed in parent appln.;			
	FION check appr	propriate box and supply the requisite information and a preliminary amendment:			
Continuation Divisional of prior application No. 09/469,657 Filed on December 22, 1999, entitled: "III-Nitride					
Light-Emitting Device With In					
PRIOR APPLICATION INFO	MATION: Exc	xaminer MEIER, S. Group Art Unit 2822			
18. CORRESPONDENCE ADDRESS					
☐ Customer Number or Bar Code Labe	1	or 🛛 Correspondence address below			
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Attorneys for					
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	,							
Please	tyne	a plus	sign	(+)	inside	this	hox	

## . 19. Fee calculations.



CLAIMS (Number Filed)	(1) FOR	(2)		(3) NUMBER EXTRA		(4) RATE		(5) CALCULATIONS
8	TOTAL CLAIMS (37 CFR 1.16(c))	-20	=	0	х	\$18	=	\$ 0.00
ı	INDEPENDENT CLAIMS (37 CFR 1.16(b))	-3	=	0	х	\$80	=	\$ 0.00
	MULTIPLE DEPENDENT CI	AIMS (if applica	ble) (3'	7 CFR 1.18(d))	+	\$270.00	=	
				BASIC FE	E (37 (	CFR 1.16(a))	=	\$ 710.00
				Total of	above	Calculations	11	\$ 710.00
	Red	uction by 50% for	filing	by small entity (Note 31 C	FR 1.9	, 1.27, 1.28).	=	
						TOTAL	=	\$ 710.00

20. <u>FEES</u> :	The Commissioner is 19-2386:	hereby authorized to cred	lit overpayments or cl	harge the follow	ving fe	es to Deposit Acc	ount No.
	Fees required under 3' Fees required under 3'		l Extension of Time I	Fees)			
21. Ot	her:					_	
NOTE		cation's correspondence address is provided be					
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22. NEW CO	RRESPONDENCE ADI	DRESS		*	<u> </u>	7	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Castomer Nu	mber or Bar Code Label				☐ Ne	w correspondence	address below
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	USA	TELEPHONE	(408) 453-9200		FAX	(408) 453-7979	
COUNTRY	OSA						

23. SIGNATURE	OF APPLICANT, ATTORNEY	, OR AGENT REQUIRED					
	Skjerven Morrill MacPherson LLP						
	25 Metro Drive, Suite 700						
	San Jo	ose, CA 95110					
	Tel. (408) 453-9200 Fax. (408) 453-7979						
Date:	February 7, 2002	<u> </u>					
Name	Rachel V. Leiterman Reg. No. 46,868						
Signature	Signature TO 1 10 A AAA () AA						
Express Mail							
Label No.							